## 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Aug 10, 2006 08:00 Al Secretary of State DOCUMENT # P98000161113 1. Entity Name BUCKHORNS CREEK DEVELOPMENT, INC. Principal Place of Business Mailing Address 45120 DORMAN PLACE CALLAHAN FL 32011 45120 DORMAN PLACE CALLAHAN FL 32011 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) City & State 4. FEI Number Applied For City & State 59-3547113 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MIZELL, JEAN H 45120 DORMAN PLACE Street Address (P.O. Box Number is Not Acceptable) CALLAHAN FL 32011 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 \$5.00 May Be 9. Election Campaign Financing DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Added to Fees Trust Fund Contribution Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00, 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change Addition TITLE TITLE ☐ Delete MIZELL, JEAN H U00000574042 08/10/06-80004-013 550.00 NAME NAME 45120 DORMAN PLACE STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY ST ZIP CITY-ST-ZIP D IIILE Delete Change Addition MIZELL, CLYDE J NAME NAME P.O. DRAWER 5011 STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY ST-7IP CITY-ST-ZIP D TILLE Delete TITLE Change ☐ Addition MIZELL, LARRY \$ NAME 45543 HODGES ROAD STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY - ST - ZIF CITY - ST - ZIP TITLE ☐ Delete TITLE Change Addition MIZELL, MICHAEL D NAME NAME 45298 HODGES ROAD STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY - ST - ZIP CITY - ST - ZIP TITLE ☐ Delete Change ☐ Addition MIZELL, WALTER S NAME NAME. 45200 DORMAN PLACE STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY-ST-ZIP CITY-ST - ZIP Delete ☐ Addition TITLE TITLE MIZELL, WALKER D NAME 45120 DORMAN PLACE STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

AGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

changed, or on an attachment with an address, with all other like empowered.

7-30-06 904-879-3727

Date Dayring Phono #

**FILED**